Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection		Docket Number (Optional)	
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		02008/092002	
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		020	J6/092002
Application Number 10/776,926-Conf. #		Filed Fe	ebruary 11, 2004
Application Number 10776,920-Colli: #2501 Filed 1 Cordary 11, 2004			
For MEASURING APPARATUS AND MEASURING METHOD			
Art Unit 2611		Examiner	Not Yet Assigned
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	2
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
X Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$ 460.00
Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$
Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$
Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
X Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to			
Deposit Account Number 50-0591 I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
x attorney or agent of record. Reg	istration Number	45,079	
attorney or agent under 37 CFR			
Registration number if acting un	der 37 CFR 1.34		
-12-		Octo	per 15, 2007
Signature		Date	
Thomas K. Scherer		(713) 228-8600	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assigness of record of the ontire interest or their representative(s) are required. Submit multiple forms if more than one alignature is required, see below.			
Total of forms are subm	itted.		